

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CA (AMBULATORY)

Facility Information

Facility Name: BELL THERAPY KIEHNAU (0011199)

Address: 10133 10135 W KIEHNAU AVE, MILWAUKEE, WI 53224

License Status: PROBATIONARY

Licensed/Certified/Registered 12/12/2005

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0096048 **End Date:** 12/12/2005 **Type:** INITIAL **Purpose:** SURVEY

Results: PROBATIONARY LICENSE ISSUED

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